

TOURISM, HOSPITALITY & CATERING RETIREMENT FUND DEPENDANT AND BENEFICIARY NOMINATION FORM - TO BE COMPLETED FOR FUND AND FUNERAL BENEFITS



USE CAPITAL LETTERS TO COMPLETE THIS FORM.

WHAT IS YOUR FULL NAME?

WHO DO YOU WORK FOR?

WHAT IS YOUR MEMBERSHIP NUMBER?

WHAT IS YOUR PHYSICAL ADDRESS?

YOUR ID/PASSPORT NO ASYLUM SEEKER NO

WHAT IS YOUR CONTACT NUMBER?

THESE ARE MY DEPENDANTS:

This could include your spouse or partner, your children, and anyone who relies on your financial support.

SURNAME	FIRST NAME/S	ID NUMBER	DATE OF BIRTH	CONTACT NUMBER	EMAIL ADDRESS	RELATIONSHIP TO ME	% SHARE (FUND BENEFIT ONLY)

I WOULD LIKE TO ADD THESE PEOPLE AS MY NOMINEES:

I would like the following people to receive a share of my benefits from the Fund once the needs of my dependants have been met.

SURNAME	FIRST NAME/S	ID NUMBER	DATE OF BIRTH	CONTACT NUMBER	EMAIL ADDRESS	RELATIONSHIP TO ME	% SHARE (FUND BENEFIT ONLY)

Member's Initials _____ Date _____

Witness's Initials _____ Date _____

PLEASE PROVIDE ANY OTHER INFORMATION THAT YOU DEEM RELEVANT FOR THE TRUSTEES TO KNOW WHEN CONSIDERING THE ALLOCATION OF YOUR DEATH BENEFITS

NEXT OF KIN/GUARDIAN

IF YOU HAVE NOMINATED A MINOR CHILD, PLEASE INDICATE THE DETAILS OF THEIR ADULT LEGAL GUARDIAN

SURNAME	FIRST NAME/S	CONTACT NUMBER

ANNEXURE A – FUNERAL BENEFICIARY NOMINATION

FOR THE PAYMENT OF MY FUNERAL BENEFIT IN THE EVENT OF MY DEATH THE FOLLOWING MUST RECEIVE MY BENEFIT

	SURNAME	FIRST NAME/S	ID NUMBER	DATE OF BIRTH	CONTACT NUMBER	EMAIL ADDRESS	RELATIONSHIP TO ME
1							
2							

IMPORTANT NOTES:

For Fund Benefits

- The trustees are guided by Section 37C of the Pension Funds Act. Your Beneficiary Nomination Form serves as an important document in the trustees' deliberations to make a fair and equitable allocation of the death benefits your dependants and nominees may be entitled to.
- Where the Fund cannot trace any dependants within 12 months of the member's death, and the member has also not nominated any nominees, the death benefit will be paid into the deceased member's estate.

For Funeral Benefits

- Beneficiaries must be older than 18 and hold a bank account in the Republic of South Africa into which the benefit will be paid. Beneficiary #1 is the person you would appoint to receive the funeral benefit after your death; beneficiary #2 would be the person to receive the funeral benefit in the case where Beneficiary #1 predeceased you. In the case where the nominated beneficiaries predeceased you, the funeral benefit will be paid to your estate.

Member's Signature _____ Date _____

Signature of Witness _____ Date _____

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